

## 2700 INTERNAL TRANSFER REQUEST FOR S.N.

(staple inside file in blue slip area)

USPTO

69/933737

DATE: <u>25300701</u>	FROM: <u>JOHN PIZZO</u> (print name)
REASON(S):	
A. You had Parent <input type="checkbox"/> B. See Title <input type="checkbox"/> C. See Abstract <input type="checkbox"/> D. See Claim(s): <u>cell</u>	
FORWARD TO:	
A. Art Unit: <u>2634</u>	<input type="checkbox"/>
B. Class: <u>375</u>	<input type="checkbox"/>
C Subclass: <u>136</u>	<input type="checkbox"/>

FURTHER EXPLANATION IF NEEDED:

*CDMA RECEIVER*

DATE: _____	FROM: _____ (print name)
REASON(S):	
A. You had Parent <input type="checkbox"/> B. See Title <input type="checkbox"/> C. See Abstract <input type="checkbox"/> D. See Claim(s): _____	
FORWARD TO:	
A. Art Unit: _____	<input type="checkbox"/>
B. Class: _____	<input type="checkbox"/>
C Subclass: _____	<input type="checkbox"/>

FURTHER EXPLANATION IF NEEDED:

DATE: _____	FROM: _____ (print name)
REASON(S):	
A. You had Parent <input type="checkbox"/> B. See Title <input type="checkbox"/> C. See Abstract <input type="checkbox"/> D. See Claim(s): _____	
FORWARD TO CLASSIFIER	
<div style="background-color: black; height: 100px; width: 100%;"></div>	

FURTHER EXPLANATION IF NEEDED:

## DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	CLASSIFIER: _____
REASON(S):	
A. You had Parent <input type="checkbox"/> B. See Title <input type="checkbox"/> C. See Abstract <input type="checkbox"/> D. See Claim(s): _____	
FORWARD TO:	
A. Art Unit: _____	<input type="checkbox"/>
B. Class: _____	<input type="checkbox"/>
C Subclass: _____	<input type="checkbox"/>

FURTHER EXPLANATION IF NEEDED: